	Effective October 1, 2001 [002547]																									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENT	my 3	OR	OTHER SMALL														
TOTAL CLAIMS			17.					RATE	I	FEE		RATE	FEE													
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	Œ	370.00	OR	BASIC FEE	740.00													
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		•			X\$ 9:	•	•	OR	X\$18=														
INDEPENDENT CLAIMS			minus 3 =		. 2			X42-			OR	X84=	145													
MUI	TIPLE DEPEN	DENT CLAIMP	RESENT					+140-	T		OR	+280=														
	the difference		olumn 2	. 1	TOTA	1		OR	TOTAL	90%	1															
	اکی	LAIMS AS A	MENDED					OTHER	THAN .																	
<u>9 -</u>	9 - 22-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) · (Column 3)									NTITY	OR	SMALL	YTTTN													
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE													
NON ON	Total	. 14	Minus	- 2	0			X\$ 9-	-		OR	X\$18=														
ME	Independent	• 3	Minus	***	3	•	1	X42=			OR	X84=	-													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+140	. T		OR	+280=														
	•							101	_1		•	TOTAL		1												
ADDIT, FEE ADDIT, FEE																										
	/ • • •	(Column 1)	1		mn 2) ÆST	(Column 3)	ካ :		_	ADDI-	1		ADDI-													
ENT B		REMAINING AFTER AMENOMENT		PREV	ABER OUSLY FOR	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL													
AMENDMENT B	Total	. 14	Minus	<b>~</b> 2	0	•		X\$ 9	-		OR	X\$18=	/.													
	Independent	• 3.	Minus	***	3	-	4	X42	. ]		OR	X84=														
	FIRST PRESE	NTATION OF M	OLTIPLE DEI	ENDEN	CLAIM		j	+140	_		OR	+280=														
								ADDIT, F			OR	TOTAL ADDIT, FEE		l												
		(Column 1)		(Cot	mn 2)	(Column 3	}		ee •		•			1												
AMENDMENT C		CLAIMS REMAINING AFTER		HIG NUI PREV	HEST ABER IOUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL		RATE	ADDI- TIONAL													
	Total	AMENDMENT	Minus	PAIC	FOR		1	X\$ 9	_	FEE		X\$18=	FEE	1												
NEW TEN	Independent	•	Minus	400		-	1	<u> </u>	┪		OR	Y94-	<del> </del>	1												
¥	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM			X42			OR		-	┨												
		44-4					_	+140			OR															
-	lf the "Highest Nu If the "Highest Nu	mber Previously i	Paid For <sup>*</sup> IN TH Paid For <sup>*</sup> IN TH	IS SPACE	is less the	en 20, enter "2," en 3, enter "3,"	•	ADDIT.	EE	propriate bo	3	ADDIT. FEE		* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number